N.M.O.C.D. COPY	C:SF
Form 9-331 (May 1983) U ED STATES SUBMIT IN TRI (Other instruction	ATE• Form approved. Budget Bureau No. 42-R1424.
DEPARIMENT OF THE INTERIOR verse side)	5. LEASE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY	NM 7068
SUNDRY NOTICES AND REPORTS ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use this form for proposals to drill or to deepen or place working a different reservoir. Use "APPLICATION FOR PERMIT " for sur proposals.)	
1.	7. UNIT AGREEMENT NAME
WELL CAS WELL OTHER DEC 1 3 1979	
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
110NSANTO COMPANY	MILLER FEDERAL
1330 Midland NBT, Midland, Tx. 79701	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)	10. FIELD AND POOL, OB WILDCAT
At surface	BURTON FLAT - MORROW
1600' FNL & 1980' FEL SEP 2.0 1070	11. SEC., T., R., M., OE BLK. AND SURVEY OR AREA
U.S. 62 Artes Sec.	Sec. 3, T-21S, R-27E
14. PERMIT NO. 15. ELEVATIONS (Show whether DR at Ca. etc.)	12. COUNTY OR PARISH 13. STATE
3199 DF	Eddy N.M.
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	
	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE PRACTURE TREATMENT	REPAIRING WELL
FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZI	
	ed Recompletion X
(Other) (Nots: Report	results of multiple completion on Well
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any	
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti- nent to this work.) *	
1. Killed well via tubing w/ 90 Bbl 10# Brine & Csg w/ 150 Bbls. 10# brine.	
Rig down tree & install BOP's; POOH w/ tbg; 2. PU & ran Otis 2 7/8" x 5 1/2" Perma Latch Pkr; 1 - 8' Sub & on-off seal divider,	
1 - 6' sub & SSD; Ran 2 7/8" Tubing, all tested above slips to 6 k#; Set Pkr @	
II.JCJ W/ IJ K# COMUTESSION: INSTALL XMAS IMAA X SIGN	
3. Test Xmas Tree to 5 k#; Rig up & start swabbing down to perfs; swab tubing down	
to 8500' from surface; SION.	
4. Rig up & WIH; Perf 11,346-50 = 4' w/ 9 holes; Small blow; swab well to 10,600', have	
600' to 700' of Htr entry/hr., some gas w/ each swab run; Prep to break down w/ 1000 Gals. MS 7 1/2% & N2.	
5. 15 1/2 Hrs. SI TP 100#; WIH w/ swab; had 400' fluid in hole; no recovery; load backside	
w/ 10# brine; pump on annulus w/ 250# while treating; Pump 5 k Std CuFt N2 pad acid-	
ized w/ 1000 Gals. 7 1/2% MS w/ 1200 Std CuFt N2 in all fluids; Had 18 Bbls. in for-	
mation @ 6400#; got communication w/ backside; Csg press came up to 2800#; SD & let	
pressure bleed off; lost rest of acid into formation @ 1	$300 \pm \& 200 \# \text{ on backside}$
Avg 1.8 Bbl. Acid + 1.8 Bbls. N2/Min @ 6400#; Max 6500#; FIS 1100#; open to flow;	
BIOW DACK 33 BDIS I Hr; 8 DDIS 2nd hr: 5.2 Bbls 3rd Hr: Start swabbing. Fl	
buuu trom surtace; Swapped 6 Bbls 1 Hr: 2 Bbls - 2n	d Hr. last 2 runs no recovery.
Hit fluid @ 10,600'; unable to get out with any fluid; S	wab total of 56.2 Bbls of 71
BDIS, IDad; USed 1/2 BDIS, ON backside, 50# ST TP in 1	5 1/2 Hrs. NTH W/ swah. had
1500' wtr_in hole; Swab dry; 1st set 1 Hr; had 300' entr	y; no recovery; SI & rig down.
10. I hereby certify that the foregoing is true and correct	
SIGNED TITLE Regional Prod. Mgr.	<u>-9/19/79</u>
(This space for Federal or State office use) ACTIVE ENGINEER	
APPROVED BY TITLE	DATE 1979
CONDITIONS OF APPROVAL, IF ANY:	
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*See Instructions on Reverse Side

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